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LATINO ADOLESCENTS IN THE UNITED STATES

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Cultural Influences on Depressive Symptoms Among Latino Adolescents in the United States: A

Review of the Literature

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### **Abstract**

By the year 2050, Hispanic youth are estimated to make up one-third of the total child and adolescent population of the United States. Hispanic adolescents are at particular risk for the development of depressive symptoms due to unique cultural stressors faced by this group as they navigate the multidimensional process of acculturation. This review of the literature sought to explore the relationship between acculturation challenges and depressive symptomology among Latino youth. A mix of seventeen cross-sectional and longitudinal studies identified the influences of cultural risk and protective factors on this mental health outcome. Negative cultural transactions such as ethnic discrimination and acculturation-related family conflict were implicated in the elevated depressive symptoms of study participants while family cohesion and biculturalism were found to be protective against maladaptive psychosocial functioning. This review also explored ways in which mental health clinicians can intervene to promote Latino youth mental health even in the face of cultural stressors.

**Keywords:** Latino, Hispanic, youth, adolescent, acculturation, mental health, depression, depressive symptoms, cultural risk factors, cultural protective factors

## **Introduction**

As of 2015, one in four Americans eighteen and younger is of Hispanic<sup>1</sup> or Latino heritage. Sons and daughters of the largest minority group in the United States, these youth help account for the 55.4 million strong Hispanic population, almost a fifth of the entire country (Krogstad & Lopez, 2015). By 2050, this diverse group is expected to make up a quarter of the US population, with Latino youth estimated to comprise 1/3 of the total child population (Murphey et al., 2014), reflecting an unprecedented shift in the country's demographics. In addition to being the largest minority population, Hispanics are also the country's youngest. Marking the first time in our nation's history that a minority group has made up such a substantial portion of American youth, understanding and supporting this group has never been more critical as the wellbeing of Hispanic Americans will be largely indicative of the well being of the nation ("Between Two Worlds", 2013).

Hispanic youth are a unique cohort, as they must navigate the turbulent period of adolescence while at the same time straddling the line between Latin American and American cultures. The majority of today's Hispanic youth are the US born children of the peak immigration wave from Mexico between 1995 and 2000 (Passel, Cohn & Gonzalez-Barrera, 2015) though a large influx of unaccompanied minors immigrated to the United States from Central America in 2014, escaping a void of opportunity and rampant violence in their home countries (Greenblatt, 2014). The current political climate in America and the historical tendency to scapegoat immigrant groups for whatever problems afflict the country at the time, complicates an already difficult process of acclimatization to the United States. This process is multidimensional and Hispanic youth are faced with economic, social, and psychological

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<sup>1</sup> "Hispanic" and "Latino" to be used interchangeably

challenges on a nearly constant basis. Though proving themselves to be a remarkably hardy group even in the midst of these tribulations (Foxen, 2015), the barrage of challenges associated with being a Hispanic immigrant or child of Hispanic immigrants in the United States can have a particularly detrimental impact on the mental health of these youth. This review seeks to explore the current literature on the connection between acculturation challenges such as perceived discrimination and acculturative stress to mental health outcomes among Latino youth, specifically depressive symptoms. In addition, it seeks to examine the way mental health care providers such as psychiatric-mental health nurses can intervene to either lessen or prevent threats to Latino youths' mental health and/or to improve the mental health of those youth already affected.

### **Relevant Definitions**

Adolescence: Defined by the World Health Organization as “the period in human growth and development that occurs after childhood and before adulthood, from ages 10 to 19” (World Health Organization, n.d.).

Hispanic: Used to refer to people who trace their cultural origin to Spain and Latin American colonies colonized by Spain. Not a racial category (“NC Minority Health”, 2010).

Latino: Used to refer to people who trace their cultural origin to Latin America including Mexico, Central America, South America, and the Caribbean. Not a racial category. (“NC Minority Health”, 2010).

Native-born/US-born: Used to refer to people born in the US, Puerto Rico, and US territories and born abroad to parents, at least one of whom was a US Citizen (Batalova & Terrazas, 2010).

Foreign-born: Used to refer to people born outside of US, Puerto Rico, other US territories to parents who are not US citizens (Batalova & Terrazas, 2010).

First generation: Any foreign-born person with foreign-born parents (Batalova & Terrazas, 2010).

Second generation: Any native-born person with foreign-born parents (Batalova & Terrazas, 2010).

Third generation and later: Any native-born person with native-born parents (Batalova & Terrazas, 2010).

Acculturation: The multidimensional process of cultural change that occurs when individuals of one culture begin to incorporate the values, beliefs, practices and language of another culture into their daily lives (Gonzales, Fabrett, & Knight, 2009).

Acculturative stress: Stress related to the acculturation process; may include negative cultural experiences such as ethnic discrimination, family and peer conflict related to acculturation, and language difficulties. Attributed to challenges associated with adapting to life in the dominant society (Potochnick & Perreira, 2010).

## **Background**

Following the Immigration and Nationality Act of 1965, which emphasized liberalization of immigration and underscored immigrants' employment skills and family relationships, immigration to the United States boomed, especially from Latin American countries. Changed policies attempted to slow the surge of immigrants from any one particular country but this effort only changed the legal status of immigrants, as the flow across the border, most notably the US-Mexican border, continued relatively uninhibited up until recent years. Latin American immigration, both authorized and unauthorized, has created a heterogeneous Hispanic population in the United States. Workers, families, and unaccompanied minors have left their countries of origin in search of better opportunities, relief from intense poverty and political corruption, and security from the drug and gang-related violence that has plagued Latin American countries in recent years (Fuligni and Perreira, 2009).

The modern Hispanic population is largely dominated by people of Mexican origin, the country with the largest influx of immigrants since the 1960s. In 2013, Mexicans made up 64.1% of the entire Hispanic population, followed by Puerto Ricans who represented about 9.5% of all US Hispanics, and then Cubans and Salvadorans, who each made up just less than 4% of the entire population. A diverse mix of Central and South Americans and a small proportion of Spaniards accounted for the remaining share of the Hispanic population (Stepler & Brown, 2015). Hispanics' places of residence are as diverse as their countries of origin, extending in all directions across the United States. California, Texas, and Florida account for over half of the total population and in combination with Arizona, New Mexico, New York, New Jersey, and Illinois, these states make up almost 75% of the nation's total Hispanic population. Over the past two decades, there has been a shift from these traditional settlement states to "emerging"

settlement states, states with comparatively little history of Latino immigration. Subsequently, the Southeastern US has seen some of the fastest growth of Latino populations, with states such as North Carolina, Tennessee, and Kentucky seeing their Latino populations more than double (Passel, Cohn & Lopez, 2011).

Despite the significant size of the Hispanic population, constant social, economic, and health disparities threaten to cripple their success. In North Carolina, where the Hispanic population growth accounted for the sixth largest increase in the country between 2000 and 2010 (Passel, Cohn & Lopez, 2011), low income and education levels, dismal health insurance rates and a high level of unemployment have contributed to a disparate rate of health problems among the state's Hispanics ("NC Minority Health", 2010). Almost a quarter (24.8%) of the Hispanic population lives beneath the state poverty line, 3.5% more than the state's African American population and 18.1% more than the state's white population. Just over four in every ten Hispanics have health insurance, with native-born Hispanics distinctly more likely to be insured than their foreign-born counterparts. Compared to 85% of white North Carolinians, only 51% of NC Hispanics had received their high school diploma in 2008 and in 2011, Hispanics made up just 2.5% of the 1,711,000 people in North Carolina who had achieved a Bachelor's degree or higher education level ("Characteristics of the Population", 2011). These disparities are unfortunately not unique to North Carolina as a quarter of the US Hispanic population is living at the national poverty level and Hispanics have the second highest rate of unemployment in the nation ("The Latino Labor Force", 2011). Hispanics have the highest uninsured rates of any racial or ethnic group, a significant contributing factor to the group's high levels of chronic illnesses such as heart disease, diabetes mellitus, and HIV/AIDS. Without the means to access preventative health care, either because of a lack of insurance, an inability to pay or the presence

of language and cultural barriers, Hispanics are at significant risk for developing and maintaining physical disorders (“Hispanic/Latino Profile”, 2015).

The current and historic reality of being a Hispanic American in the United States not only increases the risk of physical health problems but also places this group at elevated risk for the development of mental health disorders. The stresses of immigration for the newly arrived, pressures of acculturation, and pervasive host attitudes towards immigrants threaten the mental and emotional well being of Hispanic Americans. Though the lifetime prevalence rates of mental health disorders in the total Hispanic population are comparable to that of non-Hispanic whites, certain Hispanic subgroups are disproportionately affected. Puerto Ricans have the highest mental health disorder prevalence rates of all Latino ethnicities and the one in four Hispanics living below the poverty line in the United States are three times more likely to report psychological distress compared to Hispanics living above it. Research has shown that the elderly and youth Hispanic populations are especially at risk for compromised mental health (“Fact-Sheet: Latinos”, n.d.).

Despite the present and great need for quality mental health care, a myriad of structural obstacles block Hispanic Americans from getting their mental health needs met. Compared to other ethnic groups in the United States, Hispanics are significantly less likely to seek treatment for their mental health concerns. This discrepancy does not stem from a lack of appreciation for mental health but instead can be attributed to disparities in knowledge and awareness, a paucity of culturally competent mental health providers, fear over legal status and the presence of language and economic barriers (“Latino Mental Health”, n.d.). The imbalance between need and accessed care among this growing population accentuates the urgency for clinicians to have a better understanding of the issues surrounding Latino mental health.



The narrative of the Hispanic youth living in the United States paints a complicated picture for the emotional and mental well being of this group. In comparison to non-Hispanic white adolescents, factors associated with being an ethnic minority youth in this country leave Hispanic adolescents at particular risk for the development of mental health disorders. A study done by the William T. Grant Foundation, a research institute committed to reducing inequalities faced by Hispanics and other minority youth in the US, cites four possible sources of disparities in mental health outcomes among these groups: low socioeconomic status, childhood adversities, family structure, and neighborhood level factors (Alegría and Green, 2015). In 2010, more Latino youth under 18 years of age were living in poverty than any other ethnic or racial group in the United States (Lopez & Velasco, 2011). The strain of this prevalent poverty, including its connection to unsafe neighborhoods, lack of access to health care and under resourced schools (“Effects of Poverty”, n.d.) has alarming potential to threaten the mental health of these youth. Xenophobic attitudes towards Hispanics, like those present in current political discussions, subject Hispanic youth to feeling discriminated against, as evidenced by one survey in which 40% of young Latinos reported themselves, a relative, or close friend, as having been the target of ethnic or racial discrimination. These factors, in addition to the unique stressors that come with immigration and adjustment to life in the United States, leave this group especially vulnerable to compromised mental health (“Between Two Worlds”, 2013).

The face of the American youth is changing, with Hispanic adolescents making up an increasingly greater proportion of children under 18 years of age in the United States. The heightened risk of poor mental health among this group threatens to dim their bright potential as positive contributors to American society. By gaining an understanding of the risk and protective

factors of their mental health as well as identifying ways to effectively intervene, nurses and other healthcare providers will be better equipped to support this growing population.

## Methods

Relevant research concerning the effects of acculturation challenges on Latino youth mental health was identified by searching the nursing, biomedical, allied health and social sciences databases for primary research material. A total of three databases, PubMed, CINAHL, and Embase, were searched for publications from 2000 through 2015. In order to ensure that relevant studies were not missed, the search terms remained broad. Terms used were “Acculturat\* OR immigrat\* OR emigrat\* OR immigrant\* OR "first generation" OR "second generation" OR "immigrant paradox", Latino\* OR latina\* OR hispanic\*, Adolescen\* OR teen\* OR preteen OR "pre-teen" OR "young adult" OR youth\* OR "high school" OR "high schoolers" OR "middle school" OR "middle-schoolers" OR "secondary education", Discriminat\* OR prejudic\* OR racis\* OR stigma\* OR conflict\*, Anxiety OR anxious OR depress\* OR stress\* OR distress.\*

Studies were filtered using the following inclusion criteria a) Hispanic/Latino participants b) published in a peer-reviewed journal c) measures of acculturation and d) mental health outcomes. After filtering, 44 articles from Embase, 45 articles from Pubmed, and 78 articles from CINAHL remained and were screened according to titles and abstracts. 150 articles were excluded for one or more of the following criteria: a) not exclusive to Latino/Hispanic youth b) did not include depressive symptoms as an outcome c) participants were below age 10 d) participants were above age 21 and e) published before 2010. While the years 2000-2010 were initially included as appropriate publishing dates, articles published in 2010 and beyond were more up-to-date regarding recent Latino immigration trends. After duplicates were removed, 17

articles remained. 8 of the articles are cross-sectional in nature and 9 are longitudinal. All were correlational, quantitative studies. These 17 articles are included in this literature review.

## **Results**

Acculturation, the multidimensional process of cultural change that occurs when individuals of one culture begin to incorporate the values, beliefs, practices and language of the dominant culture into their daily lives, has been associated with increased risk for mental health problems among Latino youth (Angel Cano et al., 2015; Lorenzo-Blanco, Unger, Ritt-Olson, Baezconde-Garbanati, & Soto, 2012). The Acculturation Stress Theory posits that the reason behind this association lies within the cultural transactions that occur as Latino youth interact with the dominant, American culture. As Latino youth attempt to integrate their native culture with the American culture, they are increasingly exposed to stressful cultural transactions such as discrimination experiences, language difficulties and perceived cultural incompatibilities with their peers and/or family members (Vega et al., 1997). Within the literature of Latino psychology, these cultural stressors are collectively referred to acculturative stress, a phenomenon of the acculturation process that threatens to jeopardize youth's wellbeing, specifically contributing to compromised mental health.

Ethnic or racial discrimination, unfair mistreatment based on one's affiliation with an ethnic or racial group, is experienced by Latino youth in the United States on both interpersonal and societal levels. It may be perceived through a host of xenophobic behaviors such as teasing or stereotyping on the basis of language ability and physical features (Sirin & Roger-Sirin, 2015), being publicly viewed with suspicion (Angel Cano et al., 2015), differential treatment or exclusion in school or work, and racial slurs (Sirin & Roger-Sirin 2014). Perceived and real discrimination of Latino youth has been identified as one of the particularly salient factors in

depressive symptoms within this group (Angel Cano et al., 2015). With Centers for Disease Control national survey data finding Latino youth more likely to feel sad or hopeless (36.8%), to seriously consider suicide (18.9%, and to attempt suicide (11.3%) than white (27.3%, 16.2%, and 6.3% respectively) and African American (27.5%, 14.5% and 8.8%) youth, the potential relationship between discrimination and depressive symptoms is a significant concern (CDC, 2013).

### **Risk Factors for Depressive Symptoms**

#### **Perceived Discrimination**

Two studies examined ethnic discrimination, in addition to negative context of reception and bicultural stress, as potential predictors of compromised well being, internalizing symptoms, conduct problems, and health risk behaviors among recently immigrated Hispanic adolescents in Miami and Los Angeles (Angel Cano et al., 2015; Schwartz et al., 2015). Negative context of reception, the perception that the dominant culture is hostile and uninviting, and bicultural stress, the perception of pressure from integrating values and norms of both the receiving and native cultures, were found to repeatedly coincide with perceived ethnic discrimination such that the three stressors loaded onto a latent factor of cultural stress. Over time, this latent factor in turn significantly predicted lower self-esteem and optimism and more depressive symptoms among participants in Miami but not in Los Angeles, suggesting the possible moderating effect of the geographic region of the study site. Miami participants were primarily of Cuban descent and had resided in the US for a shorter period of time compared to the primarily Mexican participants in Los Angeles. The discrepancy of cultural stressor effects on depressive symptoms and well being between Miami and LA participants may be due to Latino subgroup differences, such as parenting styles and levels of acculturation, as well as environmental differences in regional

attitudes towards Hispanics, sociopolitical history, ethnic density and available resources to immigrant families (Angel Cano et al., 2015; Schwartz et al., 2015).

### **Family conflict**

Family conflict, most notably conflict between parents and their adolescent children, has been evidenced as one of the possible explanations for the detrimental effects of acculturative stress on Latino youth psychosocial functioning. The rate and extent to which Latino family members acculturate to American culture occurs at varying degrees but adolescents often acculturate at a faster rate than their parents, perhaps due to the fact that they are educated in American schools and have subsequently greater exposure to American culture and the English language. This gap in acculturation, termed *differential acculturation*, has been implicated as a potential causative factor of increased family conflict and reduced family cohesion in Latino families. Acculturation conflict between parents and adolescent children, conflict that is explicitly related to differences in cultural values as a result of differential acculturation, has been shown to have a negative effect on youth mental health. Four of the studies included in this review examined the interplay between this type of family conflict and Latino youth depressive symptoms. In a longitudinal study of 349 adolescents living in North Carolina and Arizona, Smokowski, Rose, and Bacallao examined the effect of positive and negative family dynamics on person-centered trajectories of internalizing symptoms and self-esteem (2010). Higher levels of reported parent-adolescent conflict were directly associated with significantly increased internalizing symptoms and lowered self-esteem among youth participants. In addition, this variable mediated the effect of perceived discrimination on these both of the outcomes, highlighting the detrimental impact of problematic family processes on youth mental health (Smokowski, Rose, & Bacallao, 2010).

In a cross-sectional study of 331 Latino college students, Dennis, Basañez and Farahmand sought to explain the relationship between perceived intergenerational conflict with parents and acculturation, family dynamics and the psychosocial functioning of student participants. Intergenerational conflict with parents was divided into two types: values/expectations conflicts, such that parents and their children had differing priorities regarding the children's future and career choices, and acculturation conflicts such that participants felt their parents found them "too American" or would like them to act "more traditional". Both types of conflict were associated with reduced family cohesion and increased family control and also significantly and consistently predicted increased depressive symptoms and decreased self-esteem among participants. Acculturation conflicts were specifically associated with participants who reported lower orientation towards Hispanic values than their parents, contributing to the evidence behind the deleterious effects of differential acculturation in Latino families (Dennis, Basañez & Farahmand, 2010).

Huq, Stein, and Gonzalez surveyed 172 7<sup>th</sup>-10<sup>th</sup>-grade Latino students to distinguish between the effects of general parent-adolescent conflict and acculturation-related parent-adolescent conflict on maladaptive mental health outcomes in Latino youth (2015). Results revealed that the content of parent-adolescent conflict is more influential on compromised mental health than the sheer existence of conflict alone, such that acculturation-related conflict was found to uniquely predict higher depressive symptoms and lower ethnic private regard, even when controlling for general parent-adolescent conflict. The relationship between acculturation conflict and lowered ethnic private regard was mediated by the presence of higher perceived peer discrimination, emphasizing the interconnectedness of these acculturative stressors. Huq, Stein, and Gonzalez found similar results in another cross-sectional study on Latino youth in that

culturally based-stressors such as those related to acculturative stress and discrimination were more strongly related to greater depressive symptoms among participants compared to normative stressors such as general parent-adolescent conflict and economic stress (2012).

### **Mediators of the Relationship Between Acculturative Stress and Depressive Symptoms**

#### **Socioeconomic status**

As mentioned previously in this report, socioeconomic status (SES) has been found to play a potential role in the mental health outcomes of minority youth (Alegria & Green, 2015). Two longitudinal studies incorporated the socioeconomic status of Latino youth participants in attempts to identify any moderating effects on the outcomes of perceived discrimination on depressive symptoms. In a study of 961 Latino high school students in Los Angeles, perceived discrimination in the 9<sup>th</sup> grade was a significant predictor of depressive symptoms in the 11<sup>th</sup> grade. Differing socioeconomic statuses, however, did not significantly affect this association (Basáñez, Unger, Soto, Crano & Baezconde-Garbanati, 2015). Conversely, Ríos-Salas and Larson found that higher parental socioeconomic status may be protective against the deleterious effects of discrimination on depressive symptoms among Latino adolescents with recent immigration histories, specifically in the context of *interpersonal* discrimination (2015). The association between parental SES, perceived discrimination and *societal* discrimination was less consistent and necessitates the need for more nuanced measures of discrimination in order to more effectively examine the moderating role of socioeconomic status (Ríos-Salas & Larson, 2015).

#### **Generational status/nativity**

The effect of generational differences on health outcomes of Latino youth and Latinos in general has been of particular interest in the field of Latino psychology. The immigrant paradox,

the association between increasing generation status and poor health outcomes, has been implicated as a potential contributing factor to the compromised health of later generation, U.S. born Latinos. Acculturative stress may help to explain the paradox as exposure to negative cultural transactions increases as immigrant and immigrant-origin individuals attempt to acculturate to American norms and values. These negative experiences associated with acculturative stress subject these individuals to compromised mental health. Tummala-Narra and Claudius examined the relation between perceived discrimination by peers and adults at school and depression symptoms across nativity status, specifically first-generation versus second-generation youth (2013). Over 75% of the 95 participants reported at least one incident of racial/ethnic discrimination from their school peers and over 50% of participants reported at least one incident of racial/ethnic discrimination from adults at school. Though both foreign-born youth and US born youth reported being discriminated against at least once by peers and/or adults at school, the US born participants were found to have significantly worse mental health consequences compared to the foreign born participants, supporting the theory of the immigrant paradox. US born youth with low levels of ethnic identity were particularly at risk for depressive symptoms while higher levels of ethnic identity attenuated the relationship between perceived discrimination and depressive symptomatology, suggesting the positive coping potential behind ethnic identity in US born adolescents (Tummala-Narra & Claudius, 2013).

Sirin and Rogers-Sirin sought to understand the role of discrimination-related stress in the trajectory of three types of internalizing symptoms, depression, anxiety, and somatic complaints, during middle to late adolescence in Latino children of immigrant parents and Latino children of US born parents (2015). Discrimination-related stress was found to predict all three of the mental health outcomes though results of the study highlighted the resilience of Latino adolescents.



Even in the midst of discrimination-related stress, each of the symptoms decreased over time. However, in the case of Latino youth whose parents were born in the US, levels of perceived discrimination-related stress were higher and were in turn associated with higher baseline levels of each symptom. While the symptoms did decrease between 10<sup>th</sup> and 12<sup>th</sup> grade, the rate of decline was significantly slowed for this group alone. Sirin and Rogers-Sirin believe these results point to the possibility that as Latinos become more acculturated with American culture over successive generations, they become more susceptible to the detrimental effects of discrimination-related stress (2015).

One study had confounding results compared to those supporting the immigrant paradox. In a study of the influence of discrimination and social acceptance on the psychological well-being of Latino youth in Los Angeles and North Carolina, foreign-born youth were found to experience significantly higher levels of daily depressive symptoms as well as higher levels of daily anxiety compared to US-born youth. The study's researchers posit that these results could be explained by acculturative stressors that are particularly salient to foreign-born youth such as the challenges of learning a second language, shifting family dynamics, stress surrounding the migration process and difficulties adapting to new cultural practices. Despite the higher levels of depressive symptoms and anxiety among foreign born participants, they were also found more likely to be happy compared to their US-born counterparts, suggesting the working of *immigrant optimism*, a theory attributed to immigrants' dual frame of reference. This is an alignment of their previous life before migration to their current life in the US, which is believed to be an improvement over the life they left behind (Potochnick, Perreira, & Fuligni, 2012).

**Gender**

National survey data indicates that Hispanic female youth are consistently more likely to have compromised mental health compared to Hispanic male youth. Hispanic females were almost twice as likely as Hispanic males to feel sad or hopeless (47.8% vs. 25.4% respectively), and over twice as likely to seriously consider suicide (26.0% vs. 11.5%) and to attempt suicide (15.6% vs. 6.9%) (CDC, 2013). The influence of gender on psychosocial functioning of Latino youth was examined in three studies within this review. In particular, these studies observed the role of gender in the longitudinal trajectories of depressive symptoms and self-esteem across the high school years. In a study of 1,124 Hispanic youth (54% female) in Southern California, perceived discrimination was found to mediate the effect of acculturation on depressive symptoms for girls alone. Orientations towards Hispanic identifications was associated with increased perceived discrimination which was in turn associated with higher depressive symptomatology among female participants while orientations towards US practices predicted less perceived discrimination in boys. One explanation for these results, according to the study's researchers, could be that youth who are more acculturated perceive less discrimination because they are better adjusted to the dominant culture's practices and norms compared to less acculturated youth who may perceive more discrimination because of poor language skills and poor cultural adjustment. The researchers suggest that gendered socialization could play a role in the gender differences in acculturation levels found in this study in that Latino females may spend more time at home with the family and thus may experience discrimination differently than Latino youth who spend more time outside of the home (Lorenzo-Blanco, Unger, Ritt-Olson, Soto, & Baezconde-Garbanati, 2011).

A different study of 1,922 Hispanic youth (53% female), also from Southern California, chose to examine the role of gender on depressive symptomatology in Latino youth in the context of acculturation, enculturation, and family functioning. Results indicated that as youth became more acculturated towards US practices and norms, they became less likely to endorse traditional Hispanic gender roles. For female youth, the loss of traditional gender roles was associated with a loss of family cohesion and an increase in family conflict, a possible explanation for the female participants' elevated risk for depressive symptoms (Lorenzo-Blanco, Unger, Baezconde-Garbanati, Ritt-Olson, & Soto, 2012).

Unlike the two previously mentioned studies, gender did not influence the association between perceived ethnic discrimination and depressive symptoms in a study of 323 adolescents (49.5% female) in Illinois. Female and male participants were equally affected by perceived ethnic discrimination in that they experienced similar levels of depressive symptoms. Self-esteem levels were differentially affected however, as male participants had disproportionately lower self-esteem levels than female participants, despite comparable experiences of discrimination (Zeiders, Umaña-Taylor, & Derlan, 2013).

### **Protective factors Against Acculturative Stress**

#### **Social Support**

In examining the effects of discrimination on depressive symptomatology of Latino youth, several studies also explored potential protective factors against these effects. In a study of first generation Latino youth in North Carolina, experiences of discrimination were significantly associated with an increased risk of depressive symptoms. However, in the presence of social support, particularly from peers and teachers in the adolescents' schools, the negative

effects of discrimination were mitigated to the point of no longer having a significant association with depressive symptoms (Potochnick & Perreira, 2010).

### **Positive Family Dynamics**

Familism is a multidimensional Latino cultural value system that promotes unity, cohesion, and loyalty among the Latino family unit. The needs of the family are prioritized over individual needs and authority figures (e.g. parents, elders) are superior and to be respected by the children. Latino youth who uphold this value system have been found to have fewer depressive symptoms, behavioral issues, and problems in school (Stein, Gonzalez, Cupito, Kiang, & Supple, 2015). Two studies examined the influence of familism on depressive symptomatology in the face of acculturative stress, particularly perceived discrimination. In a longitudinal study of person-centered trajectories of acculturation, internalizing symptoms, and self-esteem, Smokowski, Rose, and Bacallao identified familism as a cultural asset that acted to counter the effects of perceived discrimination by significantly lowering adolescent scores for internalizing symptoms (2010). Adolescents who reported high familism were also found to have consistently higher self-esteem compared to those who reported low familism (Smokowski, Rose, & Bacallao, 2010).

Latino youth who endorsed high familism were found to have fewer depressive symptoms in a cross-sectional study of 7<sup>th</sup> through 10<sup>th</sup> grade Latino adolescents in North Carolina. However, the positive effects of familism were not enough to withstand the significant, deleterious impact of peer discrimination on the mental health of the youth participants. These results suggest that while endorsement of familism is associated with positive psychosocial outcomes in this sample Latino youth, it did not have a strong enough effect to combat the effects of discrimination on Latino youth mental health (Stein, Gonzalez, Cupito, Kiang, &

Supple, 2015). The conflicting conclusions of these two studies highlight the need for further research on the effects of familism on Latino youth mental health, particularly if it only operates as a protective factor in specific scenarios and/or if there are other salient variables in the relationship between familism, discrimination, and youth psychosocial functioning.

### **Biculturalism**

In their longitudinal study of the effects of acculturation, acculturation stressors, and family dynamics on the mental health outcomes of Latino adolescents, Smokowski, Rose, and Bacallao identified biculturalism as a significant predictor of lowered depressive symptoms and increased self-esteem. Biculturalism involves the integration of dominant and native cultures such that an individual is able to effectively interact with both cultures (Schwartz, Zamboanga, & Jarvis, 2007 “). Within the study, biculturalism was found to be a cultural asset against maladaptive mental health among adolescents who reported high involvement in the US culture as well as high culture-of-origin involvement (Smokowski, Rose, & Bacallao, 2010). Harritatos and Benet-Martinez suggest that the reason behind this protective effect of biculturalism is that bicultural adolescents benefit from *cultural frame-switching*, an ability to flexibly navigate and shift between multiple cultural contexts, and therefore experience less acculturative stress (2002). Adolescents who retain their culture of origin while at the same time taking on the values and practices of the dominant culture have the knowledge and resources to cope with differing social and cultural situations (Harritatos & Benet-Martinez, 2002).

### **Summary of findings**

In summary, risk factors for the development of depressive symptoms among Latino youth identified in this literature review were perceived ethnic discrimination, particularly interpersonal discrimination, a plausible finding given the impact of peer relations on normative

adolescent social functioning, and family conflict related to differential acculturation between youth and their parents. Social support, family cohesion and biculturalism were identified as protective factors against existing threats to Latino mental health. The relationship between acculturative stress and depressive symptomatology was mediated by factors such as socioeconomic status, gender, and generational/nativity status. The findings of this review have implications for prevention and intervention efforts in clinical practice.

### **Implications for Clinical Practice**

The findings of this literature review demonstrate the multidimensional ways by which acculturation and acculturative stressors may lead to compromised mental health, specifically the increased risk of depressive symptoms, among Latino youth in the United States. The deleterious effects of common cultural transactions encountered by these youth, such as perceived ethnic discrimination and family conflict related to differing levels of acculturation between adolescents and their parents, necessitate the training of culturally competent clinicians who have an awareness of the existence and impact of these cultural stressors on Latino youth psychosocial functioning.

Results from these studies can inform health professionals, especially mental health care providers such as psychiatric-mental health nurses, of the interplay of cultural risk factors and protective factors and Latino youth depressive symptoms. For youth already exposed to negative factors such as discrimination and family conflict, the integration of active coping and problem-solving skills into depression intervention programs may help these youth to counter the adverse effects of these experiences. In one of the few existing clinical trials evaluating the efficacy of cognitive behavioral therapy (CBT) and/or interpersonal therapy (IPT) in Latino adolescents, Rosselló, Bernal, and Rivera examined the effect of CBT versus IPT on the treatment of Puerto

Rican adolescents with depressive symptoms (2008). The elements of CBT, such as problem-solving, role playing, and assertiveness training may be efficacious in managing experiences of ethnic discrimination while the focus on interpersonal conflict in IPT may help address these experiences as well as conflicts between parents and adolescents. Study results found that both interventions were effective in relieving depressive symptoms though CBT produced significantly greater reductions (Rosselló, Bernal, & Rivera, 2008).

The strong relation between family conflict and maladaptive mental health outcomes and the similarly strong association between family cohesion and improved mental health of Latino youth underscores the need for prevention and intervention at the family level. In a study of 121 Puerto Rican adolescents with Major Depressive Disorder, culturally informed CBT and parent psychoeducational intervention were highly effective in ameliorating depressive symptoms among youth participants (Bernal & Sáez-Santiago, 2006). Engaging Latino adolescents in conversation with their families regarding familial cultural values may serve to enhance cohesion and openness between youth and their parents and in turn promote positive youth psychosocial functioning (Stein, Gonzalez, Cupito, Kiang, & Supple, 2015).

The potential for conflicts with peers in the school setting and community settings as well as acculturative stress related to language difficulties and perceived discrimination indicates the importance of culturally relevant community and school-based programs to facilitate Hispanic adolescent resiliency (Basañez et al., 2012). While experiencing cultural stressors may be inevitable even in the face of these types of programs, enhancing Hispanic youth's ability to positively handle these stressors may help to reduce the burden on mental health outcomes (Schwartz et al., 2015).

Overall, clinicians and professionals who work with Latino youth will be better equipped to identify pathways of maladaptive mental health outcomes in this group if they integrate a working knowledge of the interrelations of Latino mental health and cultural factors into their practice.

### **Limitations of this review**

Limitations of this review include the exclusion of literature that may have been potentially relevant, the search strategy, and limitations of the selected studies. All of the articles included relied on self-report, which could have led to the under- or over-reporting of measured variables. Seven of the articles had sample sizes below 200, potentially limiting the generalizability of results. A significant limitation of the articles was the lack of Latino subgroup differentiation. Participants were predominantly of Mexican origin, thus study results may fail to accurately reflect the broader Hispanic population. The cross-sectional design of 8 of the 17 articles prevents causal interpretations of results. Several of the articles focused on a single generation (i.e. only recent immigrants or over 70% U.S. born) and therefore may not generalize to Latino youth of varying generation status. Measures of acculturation differed between studies, which could potentially affect the consistency of these measures on mental health outcomes.

### **Conclusion**

As Latino adolescents constitute a rapidly growing portion of American youth, the need to address the mental health challenges of this group has become increasingly significant. Though Latino adolescents have proven themselves to be a resilient cohort in the face of economic, social, and psychological challenges, cultural stressors associated with the acculturation process threaten to compromise their mental health. Perceived ethnic discrimination, especially on the interpersonal level, and family conflict are particularly salient



risk factors in the development of depressive symptoms in Latino youth. However, as this review of the literature demonstrates, positive cultural influences such as family cohesion and biculturalism can counter the effects of acculturative stress. Interventions on the individual and family level may serve to promote the positive psychosocial functioning of Latino youth. An awareness of the cultural influences on depressive symptoms in Latino youth living in the United States can alert mental health clinicians to potential pathways towards this mental health outcome and presents clinicians with an opportunity to support and advocate for the bright potential of this growing population.

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References

Adolescent development. (n.d.). Retrieved from

[http://www.who.int/maternal\\_child\\_adolescent/topics/adolescence/dev/en/](http://www.who.int/maternal_child_adolescent/topics/adolescence/dev/en/)

Alegria, M., & Green, J. (2015). Disparities in child and adolescent mental health and mental health services in the U.S. (Rep.). Retrieved

<http://wtgrantfoundation.org/library/uploads/2015/09/Disparities-in-Child-and-Adolescent-Mental-Health.pdf>

Angel Cano, M. , Dios, M. A., Castro, Y., Vaughan, E. L., Castillo, L. G., Lorenzo-Blanco, E. I., . . . Molleda, L. M. (2015). Alcohol use severity and depressive symptoms among late adolescent Hispanics: Testing associations of acculturation and enculturation in a bicultural transaction model. *Addictive Behaviors*, 49, 78-82.  
doi:10.1016/j.addbeh.2015.06.002

Angel Cano, M. , Schwartz, S. J., Castillo, L. G., Romero, A. J., Huang, S., Lorenzo-Blanco, E. I., . . . Szapocznik, J. (2015). Depressive symptoms and externalizing behaviors among Hispanic immigrant adolescents: Examining longitudinal effects of cultural stress. *Journal of Adolescence*, 42, 31-39. doi:10.1016/j.adolescence.2015.03.017

Basáñez, T., Unger, J. B., Soto, D., Crano, W., & Baezconde-Garbanati, L. (2013). Perceived discrimination as a risk factor for depressive symptoms and substance use among Hispanic adolescents in Los Angeles. *Ethnicity & Health*, 18(3), 244-261.  
doi:10.1080/13557858.2012.713093

Batalova, J., & Terrazas, A. (2010, December 09). Frequently Requested Statistics on

- Immigrants and Immigration in the United States. Retrieved from  
<http://www.migrationpolicy.org/article/frequently-requested-statistics-immigrants-and-immigration-united-states-1>
- Between Two Worlds: How Young Latinos Come of Age in America. (2013, July). Retrieved from <http://www.pewhispanic.org/2009/12/11/between-two-worlds-how-young-latinos-come-of-age-in-america/>
- Bernal, G., & Sáez-Santiago, E. (2006). Culturally centered psychosocial interventions. *Journal of Community Psychology J. Community Psychol.*, 34(2), 121-132.  
doi:10.1002/jcop.20096
- CDC. Youth risk behavior surveillance—the United States. Atlanta, GA: 2013.
- Characteristics of the Population in North Carolina, by Race, Ethnicity and Nativity: 2011 (Rep.). (2011). Retrieved [http://www.pewhispanic.org/files/states/pdf/NC\\_11.pdf](http://www.pewhispanic.org/files/states/pdf/NC_11.pdf)
- Dennis, J., Basañez, T., & Farahmand, A. (2010). Intergenerational Conflicts Among Latinos in Early Adulthood: Separating Values Conflicts With Parents From Acculturation Conflicts. *Hispanic Journal of Behavioral Sciences*, 32(1), 118-135.  
doi:10.1177/0739986309352986
- Effects of Poverty. (n.d.). Retrieved from <http://www.apa.org/pi/families/poverty.aspx>
- Fact-Sheet: Latinos (Rep.). (n.d.). Retrieved  
<https://www.centerforaddictionrecovery.com/addiction-news/Fact-Sheet---Latinos.pdf>

Foxen, P. (2015, March 11). Resilient Youth: In their own words. Retrieved from

<http://publications.nclr.org/handle/123456789/1159#sthash.SEFKYztl.dpuf>

Fuligni, A., & Perreira, K. (2009). Immigration and Adaptation. In Handbook of U.S. Latino Psychology: Developmental and Community Based Perspectives (pp. 99-113). Los Angeles, CA: SAGE Publications.

Gonzales, N., Fabrett, F., & Knight, G. (2009). Acculturation, Enculturation, and the Psychosocial Adaptation of Latino Youth. In Handbook of U.S. Latino Psychology: Developmental and Community Based Perspectives (pp. 115-135). Los Angeles, CA: SAGE Publications.

Greenblatt, A. (2014, July 9). What's Causing The Latest Immigration Crisis? A Brief Explainer.

Retrieved from <http://www.npr.org/2014/07/09/329848538/whats-causing-the-latest-immigration-crisis-a-brief-explainer>

Harritatos, J., & Benet-Martínez, V. (2002). Bicultural identities: The interface of cultural, personality, and socio-cognitive processes. *Journal of Research in Personality*, 36(6), 598-606. doi:10.1016/s0092-6566(02)00510-x

Huq, N., Stein, G. L., & Gonzalez, L. M. (2015). Acculturation Conflict Among Latino Youth: Discrimination, Ethnic Identity, and Depressive Symptoms. *Cultural Diversity and Ethnic Minority Psychology*. doi:10.1037/cdp0000070

Krogstad, J., & Lopez, M. (2015, June 25). Hispanic Population Growth. Retrieved from

[http://www.pewresearch.org/fact-tank/2015/06/25/u-s-hispanic-population-growth-surge-cools/ft\\_15-06-25\\_hispanic\\_trend/](http://www.pewresearch.org/fact-tank/2015/06/25/u-s-hispanic-population-growth-surge-cools/ft_15-06-25_hispanic_trend/)

Latino Mental Health. (n.d.). Retrieved from <https://www.nami.org/Find-Support/Diverse-Communities/Latino-Mental-Health>

Lopez, M., & Velasco, G. (2011, September 28). Childhood Poverty Among Hispanics Sets Record, Leads Nation. Retrieved from <http://www.pewhispanic.org/2011/09/28/childhood-poverty-among-hispanics-sets-record-leads-nation/>

Lorenzo-Blanco, E. I., Unger, J. B., Ritt-Olson, A., Soto, D., & Baezconde-Garbanati, L. (2011). Acculturation, Gender, Depression, and Cigarette Smoking Among U.S. Hispanic Youth: The Mediating Role of Perceived Discrimination. *J Youth Adolescence Journal of Youth and Adolescence*, 40(11), 1519-1533. doi:10.1007/s10964-011-9633-y

Lorenzo-Blanco, E. I., Unger, J. B., Baezconde-Garbanati, L., Ritt-Olson, A., & Soto, D. (2012). Acculturation, Enculturation, and Symptoms of Depression in Hispanic Youth: The Roles of Gender, Hispanic Cultural Values, and Family Functioning. *J Youth Adolescence Journal of Youth and Adolescence*, 41(10), 1350-1365. doi:10.1007/s10964-012-9774-7

Murphey, D., Guzman, L., & Torres, A. (2014). America's Hispanic Children: Gaining Ground, Looking Forward. *Child Trends*, 38.

Passel, J., Cohn, D., & Gonzalez-Barrera, A. (2015, September 27). Net Migration from Mexico Falls to Zero—and Perhaps Less. Retrieved from <http://www.pewhispanic.org/2012/04/23/net-migration-from-mexico-falls-to-zero-and-perhaps-less/>

Passel, J., Cohn, D., & Lopez, M. (2011, March 24). Hispanics Account for More than Half of

- Nation's Growth in Past Decade. Retrieved from  
<http://www.pewhispanic.org/2011/03/24/hispanics-account-for-more-than-half-of-nations-growth-in-past-decade/>
- Potochnick, S. R., & Perreira, K. M. (2010). Depression and Anxiety Among First-Generation Immigrant Latino Youth. *The Journal of Nervous and Mental Disease*, 198(7), 470-477. doi:10.1097/nmd.0b013e3181e4ce24
- Potochnick, S., Perreira, K. M., & Fuligni, A. (2012). Fitting In: The Roles of Social Acceptance and Discrimination in Shaping the Daily Psychological Well-Being of Latino Youth\*. *Social Science Quarterly*, 93(1), 173-190. doi:10.1111/j.1540-6237.2011.00830.x
- Ríos-Salas, V., & Larson, A. (2015). Perceived discrimination, socioeconomic status, and mental health among Latino adolescents in US immigrant families. *Children and Youth Services Review*, 56, 116-125. doi:10.1016/j.childyouth.2015.07.011
- Rosselló, J., Bernal, G., & Rivera-Medina, C. (2008). Individual and group CBT and IPT for Puerto Rican adolescents with depressive symptoms. *Cultural Diversity and Ethnic Minority Psychology*, 14(3), 234-245. doi:10.1037/1099-9809.14.3.234
- Schwartz, S. J., Unger, J. B., Baezconde-Garbanati, L., Zamboanga, B. L., Lorenzo-Blanco, E. I., Rosiers, S. E., . . . Szapocznik, J. (2015). Trajectories of Cultural Stressors and Effects on Mental Health and Substance Use Among Hispanic Immigrant Adolescents. *Journal of Adolescent Health*, 56(4), 433-439. doi:10.1016/j.jadohealth.2014.12.011
- Schwartz, S. J., Zamboanga, B. L., & Jarvis, L. H. (2007). Ethnic identity and acculturation in Hispanic early adolescents: Mediated relationships to academic grades, prosocial

- behaviors, and externalizing symptoms. *Cultural Diversity and Ethnic Minority Psychology*, 13(4), 364-373. doi:10.1037/1099-9809.13.4.364
- Sirin, S. R., Rogers-Sirin, L., Cressen, J., Gupta, T., Ahmed, S. F., & Novoa, A. D. (2015). Discrimination-Related Stress Effects on the Development of Internalizing Symptoms Among Latino Adolescents. *Child Dev Child Development*, 86(3), 709-725. doi:10.1111/cdev.12343
- Smokowski, P. R., Rose, R. A., & Bacallao, M. (2009). Influence of Risk Factors and Cultural Assets on Latino Adolescents' Trajectories of Self-Esteem and Internalizing Symptoms. *Child Psychiatry Hum Dev Child Psychiatry & Human Development*, 41(2), 133-155. doi:10.1007/s10578-009-0157-6
- Stein, G. L., Gonzalez, L. M., Cupito, A. M., Kiang, L., & Supple, A. J. (2013). The Protective Role of Familism in the Lives of Latino Adolescents. *Journal of Family Issues*, 36(10), 1255-1273. doi:10.1177/0192513x13502480
- Stein, G. L., Gonzalez, L. M., & Huq, N. (2012). Cultural Stressors and the Hopelessness Model of Depressive Symptoms in Latino Adolescents. *J Youth Adolescence Journal of Youth and Adolescence*, 41(10), 1339-1349. doi:10.1007/s10964-012-9765-8
- Stepler, R., & Brown, A. (2015, May 12). Statistical Portrait of Hispanics in the United States, 1980 – 2013. Retrieved from <http://www.pewhispanic.org/2015/05/12/statistical-portrait-of-hispanics-in-the-united-states-2013-key-charts/>
- The Latino Labor Force at a Glance (Rep.). (2012, April 12). Retrieved [http://www.dol.gov/\\_sec/media/reports/HispanicLaborForce/HispanicLaborForce.pdf](http://www.dol.gov/_sec/media/reports/HispanicLaborForce/HispanicLaborForce.pdf)

- Tummala-Narra, P., & Claudius, M. (2013). Perceived discrimination and depressive symptoms among immigrant-origin adolescents. *Cultural Diversity and Ethnic Minority Psychology*, 19(3), 257-269. doi:10.1037/a0032960
- Vega, W.A., Zimmerman, R., Gil, A., Warheit, G.J., & Apospori, E. (1997). Acculturation strain theory: Its application in explaining drug use behavior among Cuban and other Hispanic youth. *Substance Use and Misuse*, 32, 1943–1948. <http://dx.doi.org/10.3109/10826089709035608>.
- Zeiders, K. H., Umaña-Taylor, A. J., & Derlan, C. L. (2013). Trajectories of depressive symptoms and self-esteem in Latino youths: Examining the role of gender and perceived discrimination. *Developmental Psychology*, 49(5), 951-963. doi:10.1037/a0028866